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DHEC Health Advisory

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CHLORINE GAS TOXICITY, HEALTH EFFECTS AND MANDATORY REPORTING

Background Information

At 2:40 AM on January 6, 2005, a Norfolk Southern Railway train traveling at 45 mph missed a switch and ran into a parked locomotive at a textile mill in Graniteville, South Carolina. This resulted in the release of approximately 90 tons of chlorine from one tanker car destroyed in the impact and approximately 60 tons of chlorine from a second tanker car that was punctured. To date, there have been nine confirmed fatalities. It is estimated that at least 324 people have been evaluated at local hospitals in Aiken, West Columbia, and Barnwell, SC and in four hospitals in neighboring Augusta, GA. An estimated 70 people were admitted, of which approximately 35 remain hospitalized in four hospitals. Several people who were released from medical observation have been admitted for medical care because of severe late manifestations of chlorine gas toxicity.

Clinical Information

Chlorine gas is a severe pulmonary irritant. It reacts with water in mucous membranes to form hydrochloric acid and hypochlorous acid. Toxic manifestations are determined by the concentration and duration of exposure to chlorine gas.

Short-term effects of acute exposures may include any of the following:

- Laryngospasm and laryngeal edema
- o Necrosis of tracheal and bronchial epithelium
- o Chemical pneumonitis from sloughing of mucosa within 3-5 days
- o Secondary bacterial invasion often follows chemical pneumonitis
- o Pulmonary edema. **
- o Hypochloremic metabolic acidosis has also been reported
- Persistent hypoxemia is correlated to a higher mortality rate
- o Bronchopneumonia may also be a complication
- Smokers and those with asthma are most likely to demonstrate persistence of obstructive pulmonary defects

Given the limited information available on residual effects following acute exposures medical practitioners should also be alert for other lesser-known medical complications that may present after chlorine exposure has ended and clinical improvement has been observed.

^{**}Please note: Late pulmonary edema due to chlorine exposure may occur after initial clinical improvement and/or release from acute medical care. Repeat patient visits several days after acute exposure, with worsened clinical condition, is not uncommon.

Residual effects following acute exposure include decreased vital capacity, diffusing capacity, and total lung capacity with a trend towards higher airway resistance. This suggests that persistent dose-related lung function deficits may occur following acute chlorine gas exposure. Cigarette smokers are more likely than nonsmokers to be affected by long-term sequelae after acute chlorine gas exposure. Reactive airway dysfunction syndrome (RADS), or irritant induced asthma may develop and be persistent. Bronchiolitis obliterans and emphysema have been described in patients following acute exposures. Some patient may have eventual repair of injured pulmonary epithelium with fibrosis.

Most individuals who have had limited exposure to chlorine gas will experience resolution of pulmonary abnormalities over the course of one week to one month following exposure.

General guidelines for treatment of chlorine gas exposure

Acute exposure treatment includes: supplemental oxygen, bronchodilators for airway restriction/irritation and appropriate treatment for pulmonary edema. Nebulized sodium bicarbonate use is controversial. Use of parenteral steroids for prevention of short and long term sequelae is also controversial, though some studies show improvement in animal models with inhaled steroids alone and in conjunction with oral steroids. Prophylactic antibiotic use is not recommended.

Reporting of patients with illness or disease related to chlorine gas exposure

Please report to your local public health department all patients with illness or injury related to the Graniteville chlorine exposure incident seen in ED, hospital admissions or office visits since Thursday January 6, 2005. Please note that reporting of patients to the health department should include any presentation of a late manifestation or a complication of the initial exposure.

A later DHEC Health Advisory will discuss follow-up of late complications of chlorine gas exposure.

Reporting of patients is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2004 List of Reportable Conditions available at: http://www.scdhec.net/hs/diseasecont/disease.htm.

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

References and additional sources of information

Winder C. The toxicology of chlorine. Environ Res. 2001 Feb;85(2):105-14.

Wang J, Zhang L, Walther SM. Administration of aerosolized terbutaline and budesonide reduces chlorine gas-induced acute lung injury. J Trauma. 2004 Apr;56(4):850-62.

Williams JG. Inhalation of chlorine gas. Postgrad Med J. 1997 Nov;73(865):697-700.

Additional Sources for information

- Centers for Disease Control and Prevention website
 - Chlorine fact sheet (www.bt.cdc.gov/agent/chlorine/basics/facts.asp)
- Agency for Toxic Substances and Disease Registry
 - Chlorine Toxicology Frequently Asked Questions (www.atsdr.cdc.gov/tfacts172.html)
 - Medical Management Guidelines (www.atsdr.cdc.gov/MHMI/mmg172.html)

District Public Health Offices

Mail or call reports to the District Epidemiology/Disease Reports office in each district.

Appalachia I (Anderson, Oconee)

220 McGee Road Anderson, SC 29625 Phone: (864) 231-1966 Fax: (864) 260-5623

Nights / Weekends: 1-(866)-298-4442

Appalachia II (Greenville, Pickens)

PO Box 2507 200 University Ridge Greenville, SC 29602-2507 Phone: (864) 282-4139 Fax: (864) 282-4373

Nights / Weekends: (864) 460-5355 or 1-800-993-1186

Appalachia III

(Cherokee, Spartanburg, Union)

PO Box 4217 151 E. Wood Street Spartanburg, SC 29305-4217 Phone: (864) 596-2227 ext. 210

Fax: (864) 596-3443

Nights / Weekends: (864) 809-3825

<u>Catawba</u>

(Chester, Lancaster, York)

PO Box 817 1833 Pageland Highway Lancaster, SC 29721 Phone: (803) 283-3175 Fax: (803) 283-0572

Nights / Weekends: 1-(866)-867-3886 or

1-(888)-739-0748

Edisto Savannah (Aiken, Allendale, Barnwell)

1680 Richland Avenue, W. Suite 40 Aiken, SC 29801 Phone: (803) 642-1618

Fax: (803) 642-1619

Nights / Weekends: (803) 827-8668 or

1-800-614-1519

Edisto Savannah

(Bamberg, Calhoun, Orangeburg)

PO Box 1126 1550 Carolina Avenue Orangeburg, SC 29116 Phone: (803) 533-7199 Fax: (803) 536-9118

Nights / Weekends: (803) 954-8513

Low Country

(Beaufort, Colleton, Hampton, Jasper)

1407 King Street Beaufort, SC 29902 Phone: (843) 525-7603 Fax: (843) 525-7621

Nights / Weekends: 1-800-614-4698

Palmetto

(Fairfield, Lexington, Newberry, Richland)

2000 Hampton Street Columbia, SC 29204 Phone: (803) 576-2749 Fax: (803) 576-2993

Nights / Weekends: (803) 304-4252

Pee Dee

(Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion)

145 E. Cheves Street Florence, SC 29506 Phone: (843) 661-4830 Fax: (843) 661-4859

Nights / Weekends: (843) 660-8145

Trident

(Berkeley, Charleston, Dorchester)

4050 Bridge View Drive, Suite 600 N. Charleston, SC 29405 Phone: (843) 746-3832 Fax: (843) 746-3851

Nights / Weekends: (843) 219-8470

Upper Savannah

(Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda)

PO Box 3227 1736 S. Main Street Greenwood, SC 29646 Phone: 1-888-218-5475 Fax: (864) 942-3690

Nights / Weekends: 1-800-420-1915

<u>Waccamaw</u>

(Georgetown, Horry, Williamsburg)

2830 Oak Street Conway, SC 29526-4560 Phone: (843) 365-3126 Fax: (843) 365-3153

Nights / Weekends: (843) 381-6710

Wateree

(Clarendon, Kershaw, Lee, Sumter)

PO Box 1628 105 North Magnolia Street Sumter, SC 29150 Phone: (803) 773-5511 Fax: (803) 773-6366

Nights / Weekends: 1-(877)-831-4647

Bureau of Disease Control

Acute Disease Epidemiology Division 1751 Calhoun Street Box 101106 Columbia, SC Phone: (803) 898-0861 Fax: (803) 898-0897 Nights / Weekends: 1-888-847-0902